DEDARTMENT OF VICTOR				OF HER RESIDENCE				
DEPARTMENT OF HOMELAN FEDERAL EMERGENCY MANAG MISSION ASSIGNMEN		for Paperwork						
I. TRACKING INFORMATION (FEMA Use Only)								
State MP (Northern Mariana Islands) Incident:200910	NEMIS NU 150	umber 09-123392						
Program Code/Event Number 7220SU-Pre-Declarati	ion Disaster Surge /	Account i			Date/Time 10/0	Received 02/2009 10:44		
II. ASSISTANCE REQUIRED Assistance Requested				See Attache	d			
Provide Mobilization Center Support Incident:2009100101-FEMA_R9_CNMI-TS-Melor-20W	in supp /_09-30-2009, Typho	oort of oon Melor.	disaster (operations	in	response to		
Delivery Location Guam EOC, Office of Civil Defens Agana Hts, GU 96910	ie .	Internal Cont RRCC # 1		Da	ite/Time Req 10/03/2			
Initiator/Requestor Name Mike Murphy	24 Hour Phone I (510) 627-770		Email Address			Date 10/02/2009		
Site POC Name MOJICA, KAREN G	24 Hour Phone I (510) 627-723	Number	Email Address karen.mojica@dhs.	don		Date 10/02/2009		
State Approving Official (Required for DFA and TA)			Kalonimojisa	gov		10/02/2009 Date		
III. INITIAL FEDERAL COORDINATION (Operations	Section)							
M 505 11 4	Date/Time 10/02/2009	07:54 Priority 1. Lifesa				3. High 4. Medium		
IV. DESCRIPTION (Assigned Agency Action Office Statement of Work		01.04	<u> </u>	2. Life sustainii				
Center. Anticipated duration of this task is 14 days.Pun Your agency is responsible for submitting a Mission Assignme 30 days to complete, including billing. The Mission Assignme Assigned Agency		CONTRACTOR SECTION AND ADMINISTRATION OF THE PARTY OF THE		lata when Miss nitted on-line at	sion Assignm t www.fema.			
USFS (U.S. FOREST SERVICE) Mew or Amendment to MA #:			10/02/20 Total Cost Estimat	009		orted End Date 0/16/2009		
ESF/OFA Action Officer			\$100,000	73 hors.				
ESF 4 - MIKE MURPHY			Phone No. (510) 627 7704	Email				
V. COORDINATION (FEMA Use Only)			(510) 627-7704					
Type of MA: Direct Federal Assistance State Cost Share (0%, 10%,	, 25%)	Technical a	Assistance	⊠ Fe	ederal Operar ate Share (0	itions Support		
State Cost Share Percent 0.0 %			st Share Amount: \$ (all onare re	%)		
Fund Citation: 2010-06-7220SU-9094-XXXX-2501-D	ĵ	7	tion code: 70X702	3.00				
Mission Assignment Manager (Preparer)	DEBRA SESSNER					Date		
FEMA Project Manager/Branch Director (Program Approval	I)	-				10/02/2009 Date		
* Comptroller/Funds Control (Funds Review)						10/02/2009 Date		
/i. APPROVAL								
State Approving Official (required for DFA and TA):						Date		
*Federal Approving Official (required for all):	Date							
/II. OBLIGATION (FEMA Use Only)	ARLEY HOWELL					10/02/2009		
dission Assignment Number 7220511 MD LIGEO AS	Amount This Action \$	100,000.00		Date/Time Ot	bligated			
Amendment Number 00 C	Date/Time Ob							
Signature required for Direct Federal Assistance and * Signature required for all MAs.	d Technical Assista	ance MAs.						

RFA #1509-123392

Financial Program: 7220SU

Additional Mission Statement

and supply purchases must be coordinated with FEMA Operations. FEMA approval is necessary to ensure reimbursement.

Region 9, State MP, 7220SU, MA#1509-123392 (Closed) as of 10/02/2009

Print Time: 10/02/2009 14:09

F5E53G

DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY MISSION ASSIGNMENT (MA)					See Reverse for Paperwork Burden Disclosure Notice				O.M.B. NO. 1660-0047 Expires January 31, 2011			
I. TRAC	KING INFOR	MATION (FEMA Use Only)								annia and a	A STATE OF THE STA	
State MP (Northern Mariana Islands) Incident:2009100101-FEMA_R9_CNMI-TS-Melor-20W_09-30-2009								NEM	NEMIS Number 1509-123392			
Program Code/Event Number 7220SU-Pre-Declaration Disaster Surge Account							Date/	Date/Time Received 10/02/2009 13:40				
II. ASSIS												
Provide	T #1- To incre Mobilization	ease funds to 1,000,000. MA Center Support IA_R9_CNMI-TS-Melor-20W	i in	suppo	ort of		. This am	endment c		s error. in	ļ	response to
Delivery Location Guam EOC, Office of Civil Defense Agana Hts, GU 96910 Internal Contract RRCC # 15					Number Date				te/Time Required 10/03/2009			
	nitiator/Requestor Name Mike Murphy			r Phone N 627-7704			ail Address					Date 10/02/2009
Site POC Name MOJICA, KAR			r Phone N 627-7236			il Address en.mojica@dhs.gov					Date 10/02/2009	
* State Approvi	ng Official (Re	quired for DFA and TA)										Date
III. INITIA	L FEDERAL	COORDINATION (Operation	s Section)									
Action to:	☐ ESF #: _ ☑ Other:		Date/Time 10/	ate/Time 10/02/2009 13:36		Pr	Priority		•			3. High 4. Medium
IV. DESC	RIPTION (As	signed Agency Action Office	er)			_			\boxtimes		Attach	ed
Center. Anticipated duration of this task is 14 days. Purchase of accountable property is not authorized under this Mission Assignment. All equipment Your agency is responsible for submitting a Mission Assignment Quarterly Progress Report to FEMA to include cost data when Mission Assignment takes more than 30 days to complete, including billing. The Mission Assignment Quarterly Progress Report can be accessed and submitted on-line at www.fema. gov/maprogress.												
Assigned Agency USFS (U.S. FOREST SERVICE)						ojected St 10/					cted End Date 0/16/2009	
□ New or □ Amendment to MA #: 7220SUMPUSFS0300					То	Total Cost Estimate \$900,000.00						
ESF/OFA Action						100	Phone No. Email			mail		2
v 000		4 - MIKE MURPHY				(510) 627-	-7704				
v. coo	RDINATION (I	FEMA Use Only)			-							
Type of MA: Direct Federal Assistance State Cost Share (0%, 10%, 25%) Technical Assistance State Share (0%) Technical Assistance State Share (0%)												
State Cost Share Percent 0.0 % State Cost Share Amount: \$ 0.00												
Fund Citation: 2010-06-7220SU-9094-XXXX-2501-D Appropriation code: 70X702												
Mission Assignment Manager (Preparer)								Date				
** FEMA Project Manager/Branch Director (Program Approval) KAREN MOJICA								Date 10/02/2009				
** Comptroller/Funds Control (Funds Review) Date												
	ROVAL								-			
*State Approving Official (required for DFA and TA):								Date				
**Federal Approving Official (required for all):									Date			
VII. OBL	IGATION (FE	MA Use Only)				W.C.						
Mission Assignn	nent Number_	7220SU-MP-USFS-03	Amount This Action \$ 900,000.00 Date/Time					Obligat	Obligated			
Amendment Nur	mber _	01	Cumulative Amount \$ 1,000,000.00 Initials									
Signature re	quired for Di	irect Federal Assistance a	nd Technica	al Assist	ance MAs.							